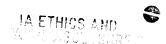
File with:

File With: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

# Reset Form



FOR INSTRUCTIONS, SEE BACK OF FORM

. 45% 6 % 25 % 16 % 6	DISCLOSURE S	SUMMARY PAGE	2008.	JUL 21 AM	11: 07
COMMITTEE NAME (Must be	same as on Statement of Organi	zation)			
Oakley For	Supervisor			FORM	
IMPORTANT: Indicate by # type of (1)Statewide/Legislative/Judge St (4)County Central Committee (5)		te (7)School Board or Other Politics	al É	DR-2 Rev. 07/2007)	
CANDIDATE COMMITTEES C	NLY:			Comm.# .ogged In	
Candidate Name		Political Party (if applicable)			
Randy Dakl	•	Kefublican			
Office Sought Linn County	Supervisor	District (if Senate or House)		Audited	
Late reports are subject to possible to po	le civil and criminal penalties. Pursu  Laca  NG REPORT	319 377 3434 TELEPHONE	A(7) and 68	7/(8/4 DATE SI	ndidate, for a
AM FILING A 7/19/	O R	REPORT FOR (1) ELECTION	. //2\NON	ELECTION VE	N.D.
	port date)	Indicate by		ELECTION 1E/	AT.
☐CHECK IF AMENDMENT TO	REPORT DATED	•		mittage auton Dat	o of Floring
				nmittees, enter Dat $2008$	
	ion) report and attach Notice of D file reports until a DR-3 is filed.)	issolution Form DR-3.	County & I	Local Committees, tion is held	
STATEME	NT OF CASH ON HAND	1			
CASH ON HAND at the beginning committee. This amou	ng of the reporting period. (Total int MUST be the same as the cas riod or must be zero if this is first	sh on hand at the end	\$		70 66
ADD TOTAL MONEY	TAKEN IN THIS PERIOD				97
Schedule A: Cash Coa	ntributions total (Attach Schedule	A) (*also see in-kind below)			81 97
Schedule F: Loans Re	eceived total (Attach Schedule F)				<b>—</b>
Schedule H: Total Sal	es of Campaign Property (Attach	Schedule H)			<u> </u>
(Schedule H	applies to Candidates' Commit	tees Only)		<b></b>	2 63
		SUB-TOTAL	\$	26	352.
SUBTRACT TOTAL N	ONEY SPENT THIS PERIOD			h	ven 63
Schedule B: Expenditi	ures total (Attach Schedule B) (***	also see debts and loans below). -,			D 5 2
Schedule r: Loan Kep	applies to Candidates' Commit  IONEY SPENT THIS PERIOD  ures total (Attach Schedule B) (** payments total (Attach Schedule B) his reporting period (if final report	-)			<u> </u>
	le D - Attach Schedule D)			***	
	om Schedule E - Attach Schedule	•			0
	m Schedule F - Attach Schedule F	F)	\$		<u> </u>
CONSULTANT BREAKDOWN	•			_YES 🔏	NO
CANDIDATE COMMITTEES ON	<del></del>	0.1.1.1.0	_		~
	RTY (From Schedule H - Attach	•	<b>\$</b>		
STATE COMMITTEES: Submit	a reconciled campaign account b	oank statement in January of eac	h year.		

### For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Linn County Republican Central Committee Oak (ey For Super Visor

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5/21/08	ID# CK#	Michael Wyrick 4823 Black Fuy Count WE Cedar Rapids FA 52411	Friend	\$ 100	
7/18	ID# CK#	Render Dyrick  4823 Black Fuy Court WE  Cedow Rapids IA 52411  Randy Oakley  7915 Marquette Dr NE  Codow Rapids IA 5240,	5e1-8	1781	
	ID# CK#				
- X - 1	ID# CK#				
	ID# CK#		,		
	ID# CK#				
	ID# CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

\$1581° \$1881°

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_ of \_\_\_

Reset Form

### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	Advat ha anna an		- C O
COMMITTEE NAME	(Must de same as	on Statement	ot Urganization)

Linn County Republican Central Committee Oakley for Supervisor

DATE	CANDIDATE ID NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
EXPENDED (MM/DD/YR)	(if applicable) AND PAC	(Disbursement) WAS MADE	(BESONIBE HANGACTION)	EXPENDED
(	CHECK NUMBER			
	ID#	Compass Advertising	Cowboy Cards	
5/19/08	CK#	417 1 et Ave 56	·	\$ 524.01
	ID#	Cadar Rapids IA 524	03	
5/28/09			Mass Mailing Postage	319.53
2/2010/	CK#	Cedar Rapids IA		217.52
_/ (	ID#	Victory Store 5200 SW 30 St	Yard Signs	
5/14/08	CK#	Davenport IA 52802		474.04
	ID#		mars Mailing Cooks	
6/27/08	CK#	417 lot Avesc	Mass Mailing Cards	735 .05
		Cedar Rapids IA 52	403	100,000
	ID#	,		
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
L				

SUB-TOTAL

\$2052.63

TOTAL (if last page of this schedule)

Zφ**52**,63

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	1			,
Page		of	/	

FOR INSTRUCTIONS, SEE BACK OF FORM  COMMITTEE NAME (Must be same as on Statement of Organization)  Oakley For Supervisor  Reset Form				SCHEDULE  E IN-KIND (Rev. 06/97) CONTRIBUTIONS  CHECK THIS BOX IF AMENDING FORM	
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
4/15/08	Pandy Dakley 7915 Marquette Dr &E Cedar Papids IA52402	Self	Campaig 1 Funds	5000	
			,		

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of / (for Schedule E)

SUB-TOTAL

TOTAL (if last page of this

schedule)

500

500

	·					SCHEDULE	
	NAME(Must be same as on Statement of Organies ey トゥァ シェアセテン(S o r	zation)			Programme .	F (Rev. 07/03)	LOANS RECEIVED & REPAID
	chedule reports money loaned to the committee v	vhich is denosited in	the committee co				
	D LOANS FROM <u>LAST</u> REPORTING PERIOD		are committee act			AMENDING	
invol	ETARY LOANS RECEIVED <u>THIS</u> REPORTING inal source of loan, such as a bank, must be sho ved. Include loans from candidate's personal fur	sem if a third name in		PART II - MO	ONETARY LOAN REPAYMENTS MADE <u>THIS</u> pans forgiven must be reported on Schedule E -	REPORTING PERIO	OD ns.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT
			\$	7/18/08	Randy Dakley 7915 Marquette Dage Cedar Rapids		\$
					Cedar Rapids FA 52402	5215	500
		•					
	TOTAL (PART I)	\$O_			TOTAL CASH REPAYMENTS (PART	TII) \$	0
				I	From Schedule E - TOTAL LOANS FORGIVEN	1 s	5000
				-	JTSTANDING LOANS END OF REPORT PERI	*	
consanguinity (bl he same as can	requires candidate committees to disclose the re ution to the committee. Relationship must be sh lood relatives) and affinity (relatives by marriage didate, but there is no familial relationship, enter mn when it applies.	own to the third degr	ee of		·	·	
					Page	of/ (for Schedule F)	